Today's Students

...Tomorrow's Leaders

#### PRAIRIE-HILLS Elementary School District 144

Post Office Box 230 • Hazel Crest, Illinois 60429
COUNTRY CLUB HILLS • HAZEL CREST • MARKHAM • OAK FOREST
J. KAY GILES, SUPERINTENDENT

September 13, 2002

Federal Communications Commission Office of the Secretary 445 - 12<sup>th</sup> Street, S. W. \* Room TW-A325 Washington, D.C. 20554 RECEIVED & INSPECTED

SEP 1 7 2002

FCC - MAILROOM

To Whom It May Concern:

Re. CC Docket Nos. 94-45, 97-21

I am writing to you to plead our district's case in hearing our appeal of denial of e-Rate funds. According to the letter we received on August 28, 2002, the SLD changed the Service Start Date, triggering a reduction in the funding commitment due to the expiration of the 120-day deadline. I have enclosed all documentation supportive to our appeal.

In speaking to Chris and John of the SLD Client Service help desk on September 10 and 11, I discovered that District #144 had actually submitted two copies of the 486 form for application identifier 06102002 and Bill Entity number 135540, referring to the following Fund Request Numbers:

No. of Copies rec'd \_\_\_\_\_\_\_ List ABCDE

Two identical copies were mailed June 11, 2002, as supporting documentation "A" indicates.

Chateaux School 3600 Chambord Lane Hazel Crest IL 60429 (708) 335-9776

Markham Park School 16239 Lawndale Avenue Markham, IL 60426 (708) 210-2869 Fieldcrest School 4100 West Wagman Avenue Oak Forest IL 60452 (708) 210-2872

Nob Hill School 3701 West 168th Street Country Club Hills IL 60478 (708) 335-9770 Highlands School 3420 Laurel Lane Hazel Crest IL 60429 (708) 335-9773

Prairie-Hills Jr. High School 3035 West 163rd Street Markham IL 60426 (708) 210-2860 Mae Jemison School 3405 West 177th Street Hazel Crest IL 60429 (708) 225-3636

Primary Academic Center 3055 West 163rd Street Markham IL 60426 (708) 210-2866

- 2 -

This document was completed and submitted by Steven C. Kozlowski. Follow-up phone calls regarding our 486 submission were also made by Mr. Paul Nevell, who was told several times that the 486 was received June 14, 2002, and was in data processing, and there was no problem or it would have been sent to "Problem Resolution." On July 26, 2002, we received a Form 486 Return Letter identifying omissions and/or errors needing immediate attention. (See documentation "B.") Remedial action was taken immediately by Mr. Steven Kozlowski. (See "C" documentation.)

Mr. Kozlowski is no longer with the district. In his place, Mr. Paul Nevell was assigned the task of completing and detailing the e-Rate funding. Thus, on August 13th, Mr. Nevell called the Client Service Desk and was told, since Mr. Kozlowski is no longer the contact person, we needed a corrected contact information notice. This was done and submitted August 13th. Unbeknownst to us, our original 120-day window was now closed. Being a first timer regarding e-Rate rules and regulations, Mr. Nevell did not realize that the June 30<sup>th</sup> deadline was not automatically extended to subsequent corrective actions called for by the SLD in the July 26<sup>th</sup> letter.

When we received the August 28, 2002 Form 486 notification letter, additional personnel were recruited to assist in maintaining our district's e-Rate applications. The additional personnel are Maria Porter and Ingrid Stevens. As you can see, three District #144 personnel are now assigned to this very important project. Collectively, we will seek to minimize our errors while adhering to and upholding all deadlines.

Please help us achieve the necessary funding on the cited FRNs as we truly were of the understanding that the original 486 filed June 11, 2002 held our claim. Should you have any questions concerning this matter, please contact Ingrid Stevens or Paul Nevell, 3015 West 163<sup>rd</sup> Street, Markham, Illinois 60426, telephone (708) 210-2888 or FAX (708) 210-9925. Your assistance in this matter is appreciated.

Sincerely.

J. Kay Giles, Superintendent

Tay Liles (is)

Enclosures

cc: Letter of Appeal - School and Libraries Division

A.\c-Rate appeal.wpd

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

Check the box next to the preferred mode of contact. (At least one box MUST be checked.)

NOTICE: The collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended, 47 U.S.C. § 254. The data in the form will be used to inform the Schools and Libraries Division of the Universal Service Administrative Company that a billed entity, and/or the schools and libraries that it represents, has begun or has planned to begin to receive service after receiving a funding commitment approval pursuant to FCC Form 471.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or potential violation of an FCC statute, regulation, rule or order, your application may be referred to the federal, state, or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party in a proceeding before the body or has an interest in the proceeding.

If you do not provide the information requested on the form, your application may be returned without action or your application may be delayed.

The foregoing Notice is required by the Paperwork Reduction Act of 1995, Pub. L. No. 104-13, 44 U.S.C. § 3501, et seq.

Public reporting burden for this collection of information is estimated to average 15.0 hours for the first submission and 1.5 hours for subsequent submissions, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing, and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the reporting burden, to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, D.C. 20554.

Entity Number 135540	Applicant's Form Identifier 06102002
Contact Person Steven C. Kozlowski	Phone Number 708-210-2881
Block 2a: FUNDING YEAR 4 ONLY -	– Early Filing Information
ITEM 6A: FOR FUNDING YEAR 4 (T	THE FUNDING YEAR BEGINNING JULY 1, 2001)
6A. <i>EARLY FILING</i> . CHECK THE BOX BELO STARTING <i>ON OR BEFORE</i> OCTOBER 2	DW IF THE FRNs ON THIS FORM 486 ARE FOR SERVICES 8, 2001.
	below have been approved by SLD as shown in my Funding I have confirmed with the service provider(s) featured in those II start on or before October 28, 2001.
	sing Item 6A is an option if and ONLY if services will start tifications in Block 4 can be accurately made, and the Form 01.
Block 2b: FUNDING YEARS AFTER I CIPA Waiver Request	FUNDING YEAR 4 — Early Filing Information and
	ARS AFTER FUNDING YEAR 4 (FUNDING YEARS JULY 1, 2002 OR LATER)
6B. <i>EARLY FILING</i> . CHECK THE BOX BELO STARTING <i>ON OR BEFORE</i> JULY 31 OF	OW IF THE FRNS ON THIS FORM 486 ARE FOR SERVICES THE FUNDING YEAR.
Commitment Decision Letter (FCDL).	below have been approved by SLD as shown in my Funding I have confirmed with the service provider(s) featured in those 11 start on or before July 31 of the Funding Year.
if services will start within the month of July o	ter Funding Year 4 using Item 6B is an option if and ONLY of the relevant Funding Year, all relevant certifications in 486 is postmarked on or before July 31 of the Funding
REQUIREMENTS FOR THE SECOND FUN	W IF YOU ARE REQUESTING A WAIVER OF CIPA NDING YEAR AFTER APRIL 20, 2001 IN WHICH YOU U AS THE BILLED ENTITY ARE THE ADMINISTRATIVE
the certifications required by the Childre and (l), because my state or local procur prevent the making of the certification(s represented in the Funding Request Nun	the date of the start of discounted services, I am unable to make sen's Internet Protection Act, as codified at 47 U.S.C. § 254(h) rement rules or regulations or competitive bidding requirements of otherwise required. I certify that the schools or libraries in on this Form 486 will be brought into compliance with of the Third Funding Year after April 20, 2001 in which they

Entity Number 135540	Applicant's Form Identifier	06102002		,
Contact Person Steven C. Kozlowski	Phone Number 708-210-2881		The state of the s	4

### **Block 3: Service Information**

7. Please provide the following information for each Form 471 Block 5 (Discount Funding Request) item for which the Billed Entity is indicating that the named Service Provider may begin submitting invoices to SLD. You will need your FCDL for some of the information required below.

Remember: The FRNs listed below must be from the same Funding Year as is listed in Item 3, Block 1.

If you need additional pages, please label them 3A, 3B, 3C, etc. and indicate the number in the space provided here. Page 3 A

	(A) 471 Application Number (10 digits) From FCDL	(B) Funding Request Number (FRN) (10 digits) From FCDL	(C) Billing Account Number  (required if contained on your FCDL)	(D) Service Provider Name From FCDL	(E) Service Provider Identification Number (SPIN) (9 digits) From FCDL	(F) Funding Year Service Start Date*  (Earliest Date that Discounts Will Begin)  (*Cannot be before July 1 of the Funding Year for which you are requesting discounts.)  (mm/dd/yyyy)
1	0000252724	0000623497	SD144	Integrated Media Systems, Inc.	143008416	7/1/2001
2	0000252724	0000622322	SD144	Advanced Wiring Solutions, Inc.	143023158	7/1/2001
3	0000252724	0000622269	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
4	0000252724	0000622591	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
5	0000252724	0000622650	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
6	0000252724	0000622749	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
7	0000252724	0000623100	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
8	0000252724	0000623149	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001

Entity Number 135540	Applicant's Form Identifier 06102002	
Contact Person Steven C. Kozlowski	Phone Number 708-210-2881	٠.
Di va		

#### Block 3: Service Information

7. Please provide the following information for each Form 471 Block 5 (Discount Funding Request) item for which the Billed Entity is indicating that the named Service Provider may begin submitting invoices to SLD. You will need your FCDL for some of the information required below.

Remember: The FRNs listed below must be from the same Funding Year as is listed in Item 3, Block 1.

If you need additional pages, please label them 3A, 3B, 3C, etc. and indicate the number in the space provided here. Page 3 B

	(A) 471 Application Number (10 digits) From FCDL	(B) Funding Request Number (FRN) (10 digits) From FCDL	(C) Billing Account Number  (required if contained on your FCDL)	(D) Service Provider Name From FCDL	(E) Service Provider Identification Number (SPIN) (9 digits) From FCDL	(F) Funding Year Service Start Date*  (Earliest Date that Discounts Will Begin)  (*Cannot be before July 1 of the Funding Year for which you are requesting discounts.) (mm/dd/yyyy)
1	0000252724	0000623239	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
2	0000252724	0000623314	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
_3	0000252724	0000624333	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
4	0000252724	0000622843	SD144	Tallgrass Systems, Ltd.	143007868	7/1/2001
5	0000252724	0000624278	SD144	Tallgrass Systems, Ltd.	143007868	7/1/2001
6	·					
7						
8						

Ent	ity Number	135	540	A	pplicant's Form	Identifier _	06102002	
Cor	itact Person	Steven C.	Kozlowski	P	hone Number	708-210	-2881	
Bl	ock 4: C	ertification	ns and Signa	iture		<del></del>		
8.	necessary. entity that i	Fill in the name is receiving seen are for basic	ne(s) of the orga	anization(s) the under this form ice only, write	at reviewed and n; attach an add e in "none" here	approved itional list i	Form 486 have been approved a a technology plan for any eligib if necessary. If ALL of the FRN	le
9.	of the eligible covering all arrangement named Bills belief, all strangement in the strangement of the strangement of the strangement is strangement of the strangeme	ble entities ide l of the service hts. I certify the ed Entity, that tatements of f d that the disc vantaged schoom those servied all records	entified in the Fe es listed on this hat I am authoris I have examine fact contained he count level used los and libraries ces. I recognize in including Form	Form 471 application 486 except to submit a details request, are true. For shared series that are treated that I may be as 479 where a stream of the true of true of the true of true of the true of true of the true of t	cation(s) cited a ept for those ser this receipt of so, and that, to the vices is conditioned as sharing in audited pursua required, that I is	bove. I cervices provervice confebrate of my onal, for furthe service nt to this approximation.	are being provided to all or some rify that there are signed contraction ided under tariff or month-to-month and it is receive an appropriate share opplication and will retain for five occumplete this form and, if audit	cts onth - ie f
	will make a		e Administrator			A THOMAS	T TTTT A 1 1	7
	ONE A Bi (See More A Bi Year 11, "	illed Entity what item. If the illed Entity what the Form 486 e Administratilled Entity what 4 and who classificated Special Note: HIS FORM P	Billed Entity is to represents on Instructions for ive Authorities. The represents on hecks Item 11d is for Billed Entity	istrative Authornot the Admine or more Admineratem 11, "Spenal")  The or more Adminerate or more Administic Check Item 11, "The ATT The ATT TH	ority must check istrative Authoritistrative Aut	titem 1 la crity, skip to horities mu Billed Enti- chorities in See the Force Administration of FUNDI	or 11b or 11c. Check only	
11.	FOR A BIL	LED ENTIT	Y WHO IS THE	E ADMINISTI	RATIVE AUTH	IORITY:		
			te of the start of					
	b pur of s incl func	mplied with the control of the Contr	Children's Internented in the Funcessary procurer has (have) not eternet Protection	of the Children et Protection A ding Request nent procedur completed all 1 Act, as codif d in the Fundi	Act, as codified Number(s) on thes, to comply we requirements of fied at 47 U.S.C. ng Request Nur	at 47 U.S.6 nis Form 48 fith the required for form CIPA for form 8 254(h) at	on this Form 486 has (have), as codified at 47 U.S.C. § 2546 C. § 254(h) and (l), the recipient 86 is (are) undertaking such actionirements of CIPA for the next this funding year. and (l), does not apply because this Form 486 is (are) receiving	(s) ons,

Entity Number 135540	Applicant's Form Identifier 06102002				
Contact Person Steven C. Kozlowski	Phone Number 708-210-2881				
FOR A BILLED ENTITY WHO R	EPRESENTS ONE OR MORE ADMINISTRATIVE AUTHORITIES <sup>1</sup> :				
	y for the consortium that I have collected duly completed and signed e members of the consortium.				
	y for the consortium that the only services that I have been approved for				
	sal service support mechanism on behalf of eligible members of the				
	nications services, and therefore the requirements of the Children's				
Internet Protection Act, as	codified at 47 U.S.C. § 254(h) and (l), do not apply.				
For Funding Years after Funding	Year 4: If you checked Item 1 id above, check ONE of the boxes below:				
	the eligible consortium members checked Form 479 Item 6d to seek a equest from the Administrator I can provide this information; OR				
	nsortium members checked Form 479 Item 6d to seek a CIPA Waiver.				
g La recitify that no eligible co	instituti instituti sitti ili ili ili ili ili ili ili ili ili				
The certification language above is no	ot intended to fully set forth or explain all the requirements of the statute.				
See the Form 486 Instructions for Ite	em 11, "Special Notes for Billed Entities Who Represent One or More				
Administrative Authorities."					
12. Signature of authorized person	13. Date June 10, 2002				
14. Printed name of authorized person					
J. Kay Giles					
15. Title or position of authorized person	1				
Superintendent					
16. Telephone number of authorized per	son				
708-210-2888	•				
Please submit this form to:					
	SLD-Form 486				
	P. O. Box 7026				
Lawrence, Kansas 66044-7026					
For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:					
•	SLD-Form 486				
	c/o Ms. Smith				
	3833 Greenway Drive				
	Lawrence, Kansas 66046				
	888-203-8100				

0143004553 0001 P01 BP0 1N0000 ML1 IH0000 AL01 ACRUX Integrated Solutions, Inc. ATTN: Debbie Crain 6985 Vistagreen Way Rockford IL 61107

SPIN # 143004553 USAC REFERENCE # C000106773

STATEMENT DATE 07/12/2002

07/11/2002	143004553 522591 BLANK SLD Invoice Number: 307424; Line Item Detail Mumber: 930883; Amount Requested: 39708.00; No Form 486 Filed or Form 486 Missing Start Date; 28; Service Provider Not Certified; 60;	.00
07/11/2002	143004553 622650 BLANK  SLD Invoice Number: 307424; Line Item Detail Number: 930884; Amount Requested: 37944.00; No Form 486 Filed or Form 486 Missing Start Date; 28; Service Provider Not Certified; 60;	.00
07/11/2 <b>002</b>	143004553 622749 BLANK SLD Invoice Number:307424;Line Item Detail Number: 930865;Amount Requested:69732.00;No Form 486 Filed or Form 486 Missing Start Date:28;Service Provider Not Cartified;50;	.00
07/11/2002	143004553 623100 BLANK SLD Invoice Number:307424; Line Item Detail Number: 930886; Amount Requested:26796.51; No Form 486 Filed or Form 486 Hissing Start Date:28; Service Provider Not Certified:60;	.00
07/11/2002	143004553 623149 BLANK SLD Invoice Number:307424;Line Item Detail Number: 930887;Amount Requested:25961.62;No Form 486 Filed or Porm 486 Missing Start Date;28;Service Provider Not Certified;60;	,00
07/11/2002	143004553 623239 BLANK SLD invoice Number:307424; Line Item Detail Number: 930886; Amount Requested:89613.61; No Form 486 Filed or Form 486 Missing Start Date; 28; Service Provider Not Certified; 60;	.00
07/11/2007	143004553 623314 BLANK SLD Invoice Number:307424;Line Item Detail Number: 930889;Amount Requested:74193.71;No Form 486 Filed or Form 486 Missing Start Date;28;Service Provider Not Cartified;60;	.00
07/11/2002	143004553 624333 BLANK SLD Invoice Number:307424; Line Item Detail Number:	.00
Direct que	stions to USAC Customer Service Bureau 888-641-8722 PG 1 OF 2	

0143004553 Q	930890; Amount Requested: 13244.00; No Form 486 Filed or Form 486 Missing Start Date; 28; Service Provider Not Certified; 60;	
07/11/2002	143004553 522269 BLANK SLD Invoice Number:307424; Line Item Detail Number: 930891; Amount Requested:65016.00; No Form 486 Filed or Form 486 Missing Start Date; 28; Sarvice Provider Not Certified:60;	.00
**	********************************	.00.

Advanced Wiring Solutions Inc.

9624 South Cook Ave Oak Lawn, IL 60453

### **Invoice**

**BILL TO** 

Prairie-Hills Elementary School Dist #144 3015 West 163rd Street Markham, IL. 60426 Attn: Paul Nevell

	P.O. NO.	TERMS	PROJECT
		Due on receipt	Junior High / Electrica
DESCRIPTION	QTY	RATE	AMOUNT
urnish and install (2) 120 volt duplex receptacles at Prairie Hill chool District #144 - Junior High School.	s		
id Amount \$31,295.00 (90% Complete)	!		
ABOR AND MATERIAL	0.9	31,295.00	28,165.5
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FAX NO. : 7732334731

Jun. 11 2002 02:35PM P2



June 11, 2002

Paul Nevell Prairie-Hills School Dist. #144 3015 W. 163rd St. Markham, IL. 60426

Attn: Paul Nevell

Re: Prairie Hills School District #144 Multi-Media System Power

Dear Paul.

We are pleased to submit a price of \$31,295,00 for the complete electrical portion for the above-mentioned project, Proposal pricing is based upon owner familied drawings and a field impection of the above-mentioned facility with Mr. Paul Neville on Wednesday, June 5, 2002. Proposal pricing includes the following items.

- Furnish and install (2) 120-volt duplex receptacles in each location as indicated on the drawings. Each location will be complete with conduit, wire, (2) 120 volt 20 amp specification grade receptables and associated electrical hardware required for a complete system. One receptacle will be installed at approximately 6' above finished floor, for the forthcoming TV monitors and the other receptacle will be installed approximately 14" above finished floor for future computer workstations. We will also provide a 120 your 20 map duplex receptable and circuit for the (2) halfway monitors.
- The receptacles will be fed from a new feeder system located in the hallway ceiling. New conduit, wiring, circuit breakers and associated electrical hardware will be installed from various electrical distribution penels located throughout the school.
- Furnish and install conduit, wire, circuit breakers and associated electrical hardware required to provide (3) 120 volt 20 sum isolated circults for the head end equipment. Circuitry will terminate in an approved junction box, in the ceiling space, above the head end equipment. Others will furnish and install fletchie connections from the junction box to the equipment.

We are also pleased to propose a price of \$1,347.50 to provide conduit, wire and associated electrical hardware required for the head end equipment at the Mac Jemison School.

All work covered in this proposal will be inscalled in a near and workmanlike manner, in secondance with the National Electrical Code.

Workmen will be properly covered by workmen's compensation and public liability insurance, certificates of which may be had upon request.

ille 1:4BUM 22ami

Acceptance of Proposal - The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Customer Signature

Date of Acceptance: 6-12-02

Advanced Wiring Solutions Inc.

'624 South Cook Ave Oak Lawn, IL 60453

## **Invoice**

DATE	INVOICE #
7/18/2002	2035

**BILL TO** 

**Prairie-Hills Elementary School Dist** #144 3015 West 163rd Street Markham, IL. 60426

Attn: Paul Nevell

•	P.O. NO.	TERMS	PROJECT
		Due on receipt	Fieldcrest School
DESCRIPTION	QTY	RATE	AMOUNT
Provide 120-volt power at Prairie Hills School District #144 Fieldcrest School.			
Bid Amount \$13,416.00 (10% Complete)			
LABOR AND MATERIAL	0.1	13,416.00	1,341.60
	į į		
If you have any questions, please call (708) 385-0916. Thank you for	or your business!		
, and the second	Juan Cabinedo.	Total	\$1,341.60



June 21, 2002

Paul Nevell Prairie-Hills School Dist. #144 3015 W. 163<sup>rd</sup> St. Markham, IL. 60426

Attn: Paul Nevell

Re: Prairie Hills School District #144 Multi-Media System Power

Dear Paul,

We are pleased to submit the following prices to provide 120-volt power for the remaining schools for the above-mentioned project. Proposal pricing is based upon owner furnished drawings and a field inspection of the above-mentioned facility with Mr. Paul Neville on Wednesday, June 5, 2002.

Nob Hill School \$12,264.00

Chateaux School \$17,928.00

Fieldcrest School \$13,416.00

Markham Park School \$15,528.00

Highlands School \$17,832.00

Proposal pricing for all schools includes the following items.

• Furnish and install (2) 120-volt duplex receptacles in each location as indicated on the drawings. Each location will be complete with conduit, wire, (2) 120 volt 20 amp specification grade receptacles and associated electrical hardware required for a complete system. One receptacle will be installed at approximately 6' above finished floor, for the forthcoming TV monitors and the other receptacle will be installed approximately 14" above finished floor for future computer workstations. We will also provide a 120 volt 20 amp duplex receptacle and circuit for the (2) hallway monitors.

# Prairie-Hills "B' Elementary School District



Post Office Box 230 Hazel Crest, Illinois 60429

COUNTRY CLUB HILLS . HAZEL CREST . MARKHAM . OAK FOREST

RECEIVED & INGPECTED

SEP 1 7 2002

FCC - MAILROOM

J. KAY GILFS, SUPERINTENDENT

RE CASE # 132416 132414 1DENT # 06102002

DEAR OR CHICKAURY

PLEASE MAKE THE FOLLOWING

CORRECTION TO OUR 486 (IDENTIFICA #06102002)

BLOCK 4 #8 SHOULD READ:

ILLINOIS STATE BOARD OF EDUCATION.

AND SUBURBAN COOK COUNTY TECHNICAL LEARNING

CASE # 132414) LEAVING CASE #132416 486 AS

Paul Nevell.

# Prairie Hills Elementary School District 144 3015 W. 163rd St. Markham IL 60426

# Fax

To:	RICHARD CHICKAWAY	From	Paul Nevell
	SCHOOL + LIBRARY	Voice	708-210-2864
		Fax	708-210-0288
Fax:	888-276-8736	Pages (	schuling this one) !
Phon	ie:	Date:	8-13-20-52
Re:	CASE # 132416, 132414	CC:	
□ Ur	gent   For Review  Please Com	ment	□ Please Reply □ Please Recycle

#### TRANSMISSION OK

TX/RX NO. CONNECTION TEL CONNECTION ID	3910 18882768736
START TIME USAGE TIME	08/13 10:28 00'46
PAGES RESULT	2 OK

# Prairie-Hills Elementary School District



Post Office Box 230 Hazel Crest, Illinois 60429

COUNTRY CLUB HILLS · HAZEL CREST · MARKHAM · OAK FOREST

J. KAY GILES, SUPERINTENDENT

Steven C. Kozlowski Assistant Superintendent COPY

July 31, 2002

Schools and Libraries Division Universal Service Administrative Company P.O. Box 7026 3833 Greenway Drive Lawrence, KS 66044-7026

Dear Sir or Madam,

Enclosed is our Form 486 Identifier: 06102002 with the required correction. In Block 4, 11(a) is checked. If you have any further questions, please feel free to contact me at 708-210-2881. Thank you.

Sincerely,

Steven C. Kozlowski

Assistant Superintendent

Sten C for lowshi

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Postage \$

Return Receipt Fee Endorsement Required)
Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

Total Postage & Fees \$

Sent To

City, State, ZiP+4

PS fromm 3600, January 2001

Set Po Box No.



#### **FORM 486 RETURN LETTER**

July 26, 2002

STEVEN C. KOZLOWSKI PRAIRIE-HILLS SCHOOL DIST 144 3015 W. 163RD STREET MARKHAM, IL 60426

Re: Applicant's Form 486 Identifier: 06102002

Dear STEVEN C. KOZLOWSKI:

Enclosed you will find an FCC Form 486 Receipt of Service Confirmation Form that you sent to the Schools and Libraries Division (SLD). Unfortunately, we are unable to process your Form. We have included a list of the reason(s) why we were not able to process your Form. We encourage you to review this information and make the necessary corrections or changes to the Form and resubmit your FCC Form 486 to us.

#### Reasons Why Your FCC Form 486 is Being Returned to You:

The certifications in Block 4, Items 11(a)-11(e), of the FCC Form 486 submitted are all blank. For Funding Year 4 and later Funding Years, Billed Entities must check at least one of the boxes labeled (a) through (e) in Item 11.

We regret the delay in processing your form. We encourage you to respond to this letter as soon as you are able, by submitting a correct FCC Form 486. If you have any questions about the enclosed information, or you need a clean copy of the FCC Form 486, please visit the SLD Web Site at <a href="http://www.sl.universalservice.org">http://www.sl.universalservice.org</a>; or, contact our Client Service Bureau at 888-203-8100. Once you return a correct FCC Form 486 to the SLD, we will process your Form and notify each Service Provider that is listed in this Form of the relevant information for the particular service or group of services being delivered by that Service Provider to you.

Schools and Libraries Division
Universal Service Administrative Company

Enclosure (1) FCC Form 486

FCC Form **486** 

Do Not Wri e In This Area

Approval by OMB

3060-0853

07-15-02 31500

Schools and Libraries Chrystan Service

### **Receipt of Service Confirmation Form**

FCC Form 486: To be completed by the Billed Entity Please read instructions before completing.

Estimated Average Burden Hours For First Submission: 15.0 hours For Subsequent Subm ssions: 1.5 hours

Form 486 Applic

State

06102002 Applicant's Form Identifier \_ (Create your own code to identify THIS Form 486)

**Block 1: Billed Entity Information** 

2. Billed Entity Number 3. Funding Year 1. Name of Billed Entity 2001-2002 Prairie-Hills School Dist 144

City

4. Complete Mailing Address of Billed Entity Street Address, P. O. Box or Route Number 3015 W. 163rd Street

Markham ILFax Telephone Number

E-Mail Address skozlowski@phsd144.net

10-Digit Telephone Number 708-210-2881

708--210-9925

5. Contact Person Information

Contact Person Name

Steven C. Kozlowski

Mailing Address (if different from Item 4)

Street Address, P. O. Box or Route Number

City

State

Zip Code

Zip Code

60426

10-Digit Telephone Number 708-210-2881

Fax Te ephone Number 708-210-9925

E-Mail Addres:

skozlowski@phsdl44.net

Check the box next to the preferred mode of contact. (At least one box MUST be checked.)

Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Tide 18 of the United States Code, 18 U.S.C. Sec. 1001.

NOTICE: The collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended, 47 U.S.C. § 254. The data in the form will be used to inform the Schools and Libraries Division of the Universal Service Administrative Company that a billed entity, and/or the schools and libraries that it represents, has begut or has planned to begin to receive service after receiving a funding commitment approval pursuant to FCC Form 471.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or potential violation of an FCC statute, regulation, rule or order, your application may be referred to the federal, state, or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party in a proceeding before the body or has an interest in the proceeding.

If you do not provide the information requested on the form, your application may be returned without action or your application may be delayed.

The foregoing Notice is required by the Paperwork Reduction Act of 1995, Pub. L. No. 104-13, 44 U.S.C. § 3501 et seq.

7. 11. 102 CX

Public reporting burden for this collection of information is estimated to average 15.0 hours for the first submission and 1.5 hours for subsequent submissions, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing, and reviewing the collection of information. Send comments regarding this burden estunate or any other aspect of this collection of information, including suggestions for reducing the reporting but len, to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, D.C. 20154.

and (1), because my state or local procurement rules or regulations or competitive bidding requirements prevent the making of the certification(s) otherwise required. I certify that the schools or libraries represented in the Funding Request Number(s) on this Form 486 will be brought into compliance with the CIPA requirements before the start of the Third Funding Year after April 20, 2001 in which they

Page 2 of 5

apply for discounts.

	Entity Number 135540 Applicant's Form Identifier 06102002
Action to conception	Contact Person Steven C. Kozlowski Phone Number 708-210-2881
-	Block 3: Sarvice Information

#### Service Information

7. Please provide the following information for each Form 471 Block 5 (Discount Funding Request) item for which the Billed Entity is indicating that the named Service Provider may begin submitting invoices to SLD. You will need your FCDL for some of the information required below.

Remember: The FRNs listed below must be from the same Funding Year as is listed in Item 3, Block 1.

If you need additional pages, please label them 3A, 3B, 3C, etc. and indicate the number in the space provided here. Page 3 A

(A) 471 Applica Numb (10 digi	er Number (FRN)	(C) Billing Account Number  (required if contained on your FCDL)	(D) Service Provider Name  Prom FCDL	(E) Service Provider Identification Number (SPIN) (9 digits) From FCDL	(F) Funding Year Service Start Date*  (Earliest Date that Discounts Will Begin)  (*Cannot be before July 1 of the Funding Year for which you are requesting discounts.)  (mm/dd/yyyy)
0000252722	0000623497	SD144	Integrated Media Systems, Inc.	143008416	7/1/2001
0000252724	DD00622322 X	SD144	Advanced Wiring Solutions, Inc.	143023158	7/1/2001
0000252724	0000622269	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
0000252724	0000622591 X	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
0000252724	0000622650 メ	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
0000252724	0000622749 vX	S0144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
0000252724	المالية في المالية الم	50144	Actua Integrated Sciutions, Inc.	113004553	7/1/2003
0000252724	0000623149 X	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001

Entity Number 135540	Applicant's Form Identifier 06102002	
Contact Person Steven C. Kozlowski	1 Phone Number 708-210-2881	
		والشيار والمساور والمساور والمساور

#### Block 3: Service Information

Please provide the following information for each Form 471 Block 5 (Discount Funding Request) item for which the Billed Entity is indicating that the named Service Provider may begin submitting invoices to SLD. You will need your FCDL for some of the information required below.

Remember: The FRNs listed below must be from the same Funding Year as is listed in Item 3, Block 1.

If you need additional pages, please label them 3A, 3B, 3C, etc. and indicate the number in the space provided here. Page 3 B

CONTRACTO THE PROPERTY OF THE	(A) 471 Application Number (10 digits) From FCDL	(B) Funding Request Number (FRN) (10 digits) From FCDL	(C) Billing Account Number (required if contained on your FCDL)	(D) Service Provider Name From FCDL	(E) Service Provider Identification Number (SPIN) (9 digits) From FCDL	(F) Funding Year Service Start Date*  (Earliest Date that Discounts Will Begin)  (*Cannot be before July 1 of the Funding Year for which you are requesting discounts.) (mm/dd/yyyy)
	0000252724	0000623239 🙉	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
2	0000252724	0000623314 4-	SD154	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
3	0000252724	0000624333	SD144	Acrux Integrated Solutions, Inc.	143004553	7/1/2001
4	0000252724	0000622843	SD144	Tallgrass Systems, Ltd.	143007868	7/1/2001
5	0000252724	00006-24 <del>2</del> 78 X	SD144	Tallgrass Systems, Ltd.	143007868	7/1/2001
6						
8						

tact Person Steven	C. Kozlowski	Phone Number 708-210-2881
ock 4: Certificat		I notic lantifier 100 210 7001
	io <b>ns and</b> Signature	
necessary. Fill in the entity that is receiving listed herein are for b	name(s) of the organizati g services covered under asic telephone service on	
of the eligible entities covering all of the ser arrangements. I certi- named Billed Entity,	s identified in the Form 4 vices listed on this Form fy that I am authorized to that I have examined this	36 have seen, are planned to be, or are being provided to all or some 71 application(s) cited above. I certify that there are signed contracts 486 except for those services provided under tariff or month-to-month submit this receipt of service confirmation on behalf of the above-request and that, to the best of my knowledge, information, and are true.
most disadvantaged s benefits from those s years any and all reco	chools and libraries that a ervices. I recognize that ords, including Forms 479	ared services is conditional, for future years, upon ensuring that the are treated as sharing in the services receive an appropriate share of I may be audited pursuant to this application and will retain for five 9 where required, that I rely upon to complete this form and, if audited, records.
	NOTES FOR COMPLE	TING THE CERTIFICATIONS IN ITEM 11
ONE item. If  A Billed Entit (See the Form More Adminis  A Billed Entit Year 4 and wh 11, "Special N  IF THIS FOR	the Billed Entity is not the year of year of the year of year of the year of year of the year of year of the year of y	ve Authority must check Item 11a or 11b or 11c. Check only e Admir istrative Authority, skip to Item 11d. hore Administrative Authorities must check Item 111 or 11e. 11, "Special Notes for Billed Entities Who Represent One or hore Administrative Authorities in Funding Years after Funding wheek Item 11f or 11g. (See the Form 486 Instructions for Item Tho Represent One or More Administrative Authorities.") NDING YEAR PRIOR TO FUNDING YEAR 4 (THE 1, 2001). SKIP TO ITEM 12.
FOR A BILLED EN	TITY WHO IS THE ADI	MINISTRATIVE AUTHORITY:
a the recipient complied wi and (I).  b pursuant to to for service reincluding an funding year c the Children recipient(s).	(s) of service represented the the requirements of the the Children's Internet Propresented in the Funding y necessary procurement but has (have) not comp 's Internet Protection Act	in the Funding Request Number(s) on this Form 486 has (have) Children's Internet Protection Act, as codified at 4" U.S.C. § 254(h) of the recipient (s) Request Number(s) on this Form 486 is (are) undertaking such actions, procedures, to comply with the requirements of CIPA for the next letted all requirements of CIPA for this funding year.  The procedures of the requirements of the next letted at 47 U.S.C. § 254(h) and (l), does not apply because the the Funcing Request Number(s) on this Form 486 is (are) receiving
	I certify that the service of the eligible entities covering all of the serangements. I certinamed Billed Entity, belief, all statements  I understand that the most disadvantaged shenefits from those syears any and all recovering make available to the A Billed Entity (See the Form More Administrated A Billed Entity (See the Form	necessary. Fill in the name(s) of the organization entity that is receiving services covered under listed herein are for basic telephone service on State of Illinols - Peer Review  I certify that the services listed on this Form 40 of the eligible entities identified in the Form 40 covering all of the services listed on this Form arrangements. I certify that I am authorized to named Billed Entity, that I have examined this belief, all statements of fact contained herein as I understand that the discount level used for shoost disadvantaged schools and libraries that a benefits from those services. I recognize that a years any and all records, including Forms 479 will make available to the Administrator such  NOTES FOR COMPLE  A Billed Entity who is the Administration ONE item. If the Billed Entity is not the A Billed Entity who represents one or make a service of the Form 486 Instructions for Item More Administrative Authorities.")  A Billed Entity who represents one or make a service of Billed Entities Who represents the service of Billed Entities of the State of the

	Military and the control of the cont			
Entity Number 135540	Applicant's Form Identifier 06102002			
Contact Person Steven C. Kozlowski	Phone Number 708-210-2881			
FOR A BILLED ENTITY WHO RE	PRESENTS ONE OR MORE ADMINISTRATIVE AUTHORITIES1:			
<ul> <li>d</li></ul>				
For Funding Years after Funding Y	ear 4: If you checked Item 11d above, check ONE of the boxes below:			
	he eligible consortium members checked Form 479 Item 6d to seek a			
	uest from the Administrator I can provide this information; OR sortium members checked Form 479 Item 6d to seek a CIPA Waiver.			
The certification language above is not	intended to fully set forth or explain all the requirements of the statute.			
See the Form 486 Instructions for Iter Administrative Authorities."	m 11, "Special Notes for Billed Entities Who Represent One or More			
12. Signature of authorized person	13. Date June 10, 2002			
14. Printed name of authorized person				
J. Kay Giles				
15. Title or position of authorized person				
Superintendent				
16. Telephone number of authorized pers	on			
708-210-2888				
Please submit this form to:				
F	SLD-Form 48G P. O. Box 7026 .awrence, Kansas 66044-7026			
For express delivery services or U.S. Postal Service, Return Receipt Requested, send this form to:				
•	SLD-Form 483			
c	o Ms. Smith			
	833 Greenway Drive			
	awrence, Kansas 66046 88-203-8100			



Schools and Libraries Division P.O. Box 7026 3833 Greenway Dr. Lawrence, KS 66044-7026

> PRAIRIE-HILLS SCHOOL DIST 144 ATTN: STEVEN C. KOZLOWSKI 3015 W. 163RD STREET MARKHAM, IL 60426

SEP 1 7 2002
FCC - MAILROOM

Conversation by Caul Revell - to be larged sebent account Claims

Not all work has been performed Have all therep there?

" ( "

August 7, 2002

Mr. Richard Chickaway Schools & Libraries Division FAX: 888-276-8736

RE:

Form 486 (Identifier #06102002) Case #132414 & #132416

Dear Mr. Chickaway,

Steven C. Kozlowski is listed as the contact person on our form 486, identifier #06102002. Mr. Kozlowski is no longer with Prairie-Hills Elementary School District 144. You have my permission to discuss our form 486, identifier #06102992, with Mr. Paul Nevell, District Technology Coordinator. Mr. Nevell can be reached at 708-210-2864, or via e-mail at pnevell@phsd144.net. Thank you.

Sincerely,

J. Kay Giles Superintendent

CC:

Paul Nevell

Technology Coordinator